

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE

Aug 2, 2018

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40080-17-C-0505	Repairs to Paint & Blast Shop, Bldg. 339NS, NSA Annapolis	047

CONTRACTOR	SUPERINTENDENT
Lansdowne Construction	Fredrick K. Gerheiser, PE

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)

## WORK PERFORMED TODAY

Schedule Activity No	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
64; 65; 70; 71	Bldg 339NS - continued installation of control valves for all UHs; all UHs hung per contract. Finishing piping of 2 remaining UHs.	BPI Mechanical	2	Pipefitter; Pipefitter Apprentice	20

<b>JOB SAFETY</b>	WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	<input checked="" type="radio"/> YES <input type="radio"/> NO	TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CONT SHEETS	20
	WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	<input type="radio"/> YES <input checked="" type="radio"/> NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	752
	WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed)	<input type="radio"/> YES <input checked="" type="radio"/> NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	772
	WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed actions.)	<input type="radio"/> YES <input checked="" type="radio"/> NO		

Schedule Activity No	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	<input checked="" type="checkbox"/> SAFETY REQUIREMENTS HAVE BEEN MET	Add	Del
64; 65; 70; 71	Proper wearing and use of PPE; working from a lift with proper tie-off safety requirements.			

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)	Add	Del
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Schedule Activity No	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.	Add	Del
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Schedule Activity No	Owner	Description of Construction Equipment Used Today (incl Make and Model)	Hours Used

	Add	Del
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Schedule Activity No	REMARKS
	Work progressing nicely.

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CONTRACTOR/SUPERINTENDENT

DATE